

PATENT FEE(S) TRANSMITTAL

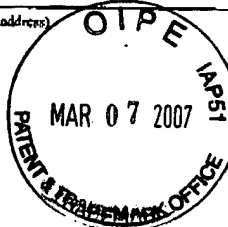
Complete and send this form, together with applicable fee(s), to: **Mail Stop ISSUE FEE**  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
 or **Fax (571)-273-2885**

**INSTRUCTIONS:** This form should be used for transmitting the **ISSUE FEE** and **PUBLICATION FEE** (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Noter Use Block 1 for any change of address)

23552 7590 12/08/2006

**MERCHANT & GOULD PC**  
**P.O. BOX 2903**  
**MINNEAPOLIS, MN 55402-0903**



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission  
 hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Sarah Dannecker** (Depositor's name)  
 (Signature)  
**March 7, 2007** (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/654,276	09/01/2000	Smadar Cohen	9124.117US01	5848

TITLE OF INVENTION: TISSUE ENGINEERED BIOGRAFTS FOR REPAIR OF DAMAGED MYOCARDIUM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	03/08/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
WEHBE, ANNE MARIE SABRINA	1633	424-093700				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member one registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

03/08/2007 AUG 05/2008 132725 09654276  
 Merchant & Gould P.C.  
 01 EC:2501 700.00 DA  
 02 6.00 DA  
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**BEN-GURION UNIVERSITY OF THE NEGEV**  
**RESEARCH & DEVELOPMENT AUTHORITY**

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Beer-Sheva, Israel

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☐ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 2

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit (any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date March 7, 2007Typed or printed name Gregory A. SebaldRegistration No. 33,280

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**Merchant & Gould**

An Intellectual Property Law Firm

Merchant & Gould P.C.  
3200 IDS Center  
80 South Eighth Street  
Minneapolis, MN 55402-2215

A Professional Corporation

Fax Transmission | March 7, 2007

TO:

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450	FROM: Gregory A. Sebald  OUR REF: 09124.0117US01  TELEPHONE: 612.336.4728
---	---

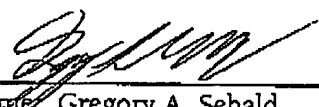
Total pages, including cover letter: 2

PTO FAX NUMBER 1-571-273-2885

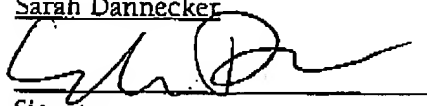
If you do NOT receive all of the pages, please telephone us at 612.332.5300, or fax us at 612.332.9081.

Title of Document Transmitted: Issue Fee Transmittal - Part B  
Applicant: COHEN et al.  
Serial No.: 09/654,276  
Filed: September 1, 2000  
Group Art Unit: 1633  
Our Ref. No. 09124.0117US01  
Confirmation No. 5848

Please charge Deposit Account No. 13-2725 for the following item(s): \$6.00 for Printed copies of patent w/o color, regular service, delivery by USPS, USPTO Box, or electronic means, \$700.00 for Utility issue fee. Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

By:   
Name: Gregory A. Sebald  
Reg. No.: 33,280

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Sarah Dannecker  
Signature3/7/07  
Date

GEN023.DOT